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Examiner Mark Bockelman and OIPE	M. Robert Kestenbaum					
COMPANY:	DATE:					
Commissioner for Patents	SEPTEMBER 23, 2006					
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571 27 3 83 00	Examiner Bockelman – 2 pages					
	OIPE – 4 pages					
HONE NUMBER:	SENDER'S REFERENCE NUMBER:					
571 272 494 1	TRI 42					
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Request for Withdrawal as Attorney or	09/398,854					
Agent	•					

NOTES/COMMENTS:

Attention: Examiner Bockelman

I am faxing a Request for Withdrawal as Attorney or Agent for this application. I have been informed by the inventors' representatives with whom I have dealt in Germany that the clients do not wish to pursue this reissue application. They have also informed me that they do not know whom I should contact to see if an assignee wishes to pursue this matter.

Sincerely,

M. Robert Kestenbaum

Reg. No. 20,430

11011 BERMUDA DUNES NE ALBUQUERQUE, NEW MEXICO USA 87111 PHONE (505) 323-0771 FAX (505) 323-0865

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PTO/SB/83 (06-03)

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/398,854
Filing Date	September 17, 1999
First Named Inventor	Baumann
Art Unit	3766
Examiner Name	Mark Bockelman
Attorney Docket Number	(B&B)TRI-42

	missioner for	Patents	· - · · · ·		-				
	Box 1450	242 4450							
	andria, VA 22313-1450								
	ply to withdraw as attorney or agent for the above identified patent application.								
	ons for this request are:								
Karl-Heinz Of no longer inter office action in office action.	epresentation for this Reissue Application was based upon my representation of the inventors and direct interaction with Heinz Otto's counsel in Germany. I have been informed by Herr Otto's German legal representative that the inventors are iger interested in pursuing the reissue application, nor do they know who I should contact to give notice of the pending action in this reissue application. I was instructed by the German legal representative not to respond to the outstanding action. I do not have any contact points for the assignee. Therefore, I do not have an address to use for directing future spondence. Please remove my name as the legal representative for this application.								
		CORRESPONDENCE ADD	RESS						
1. The	The correspondence address is NOT affected by this withdrawal.								
2.	Change the correspondence address and direct all future correspondence to:								
 -	er Number								
OR	_								
Firm or Individu	al Name	Unknown							
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all th	e attorneys/age ttorneys/agents	behalf of myself and ents of record, s (with registration numbers) listed on the s associated with Customer Number	e attached p	aper(s), c	or .				
This request is enclosed in triplicate (including any attachments).									
Name	M. Robert Kestenbaum								
Signature	111.4	ut from	Registration No. 20,430						
Date	9/23/2006								
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between									

approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, land submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:

If you need assistance in completing the form, call 1-800-PTO-R199 and select postion ?

PAGE 2/2 * RCVD AT 9/23/2006 9:13:39 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/32 * DNIS:2738300 * CSID:5053230865 * DURATION (mm-ss):00-68